



AF/1653
Atty. Dkt. No. 026063-1901

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Carl W. Fuller, et al.

Title: DERIVATIVES OF 7-DEAZA -2' -
DEOXYGUANOSINE- 5' -
TRIPHOSPHATE, PREPARATION
AND USE THEREOF

Appl. No.: 09/045,732

Filing Date: 03/20/1998

Examiner: S. Siu

Art Unit: 1653

RECEIVED

FEB 14 2003

TECH CENTER 1600/2900

CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231, on the date below. <u>Deborah L. Wykes</u> (Printed Name) <u>Deborah L. Wykes</u> (Signature) <u>February 7, 2003</u> (Date of Deposit)
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#16
Plunkett
3/4/03

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents
Washington, D.C. 20231

Sir:

Applicant hereby appeals to the Board of Patent Appeals from the decision of the final rejection dated October 8, 2002 of the Examiner finally rejecting Claims 1-19.

[] Applicant claims small entity status.

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[X] Notice of Appeal Fee

[X] To be paid as detailed below

[] Not required (Fee paid in prior appeal)

02/12/2003 BABRAHA1 00000108 09045732

01 FC:1401	320.00 OP
02 FC:1251	110.00 OP

The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$320.00
<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$110.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$110.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$430.00

- ☐ Please charge Deposit Account No. 50-0872 in the amount of \$110.00 . A duplicate copy of this transmittal is enclosed.
- ☒ A check in the amount of \$430.00 is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 2/7/03

By Wesley B. Ames

FOLEY & LARDNER
P.O. Box 80278
San Diego, California 92138-0278
Telephone: (858) 847-6714
Facsimile: (858) 792-6773

Wesley B. Ames
Attorney for Applicant
Registration No. 40,893